ATTACHMENT 3

BUSINESS DECLARATION

| 1. | Name of Firm: | | | Tax Identification No.: | |
|-------------|---|----------------|----------------------|--------------------------------------|--|
| 2. | Address of Firm: | | | | |
| 3. | Telephone Number of Firm: | | | | |
| 4. | a. Name of Person Making Declaration | 1 | | | |
| | b. Telephone Number of Person Making Declaration | | | | |
| | c. Position Held in the Company | | | | |
| 5. | Controlling Interest in Company ("X" all appropriate boxes) | | | | |
| | a. Black American b. Hispanic A | merican c. Nat | ive American | d. Asian American | |
| | e. Other Minority (Specify) | f. Ott | ner ecify) | | |
| | Name of the state | | | vice Disabled Veteran Small Business | |
| 6. | Is the person identified in Number 4 above, responsimited to financial and management decisions? a. Yes b. No (If "NO," provide | | | son who has this authority.) | |
| 7. | Nature of Business (Specify major services/products (NAIC)) | | | | |
| 8. | (a) Years the firm has been in business: | | (b) No. of Employees | | |
| 9. | Type of Ownership: a. Sole Owners | nip 🔲 b. | Partnership | | |
| | c. Other (Explain) | | | | |
| 10. | Gross receipts of the firm for the last three years: | a.1. Y End | Year ing: | b.1. Gross Receipts | |
| | a.2. Year b.2. Gross Ending: Receipts | a.3. End | | b.3. Gross Receipts | |
| 11. | Is the firm a small business? | a. Yes | | b. No | |
| ARI [A] | ECLARE THAT THE FOREGOING STATE E TRUE AND CORRECT TO THE BEST M AWARE THAT I AM SUBJECT TO 0 18 USCS 1001. | OF MY KNOWLE | DGE, INFOR | | |
| 12. ; | a. Signature | b. Da | nte: | | |
| c. 7 | Typed Name | d. Ti | tle: | | |
| | | | - | | |